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ABSTRACT

This paper describes the efforts of a team of parents, educators, and related personnel to promote successful classroom inclusion of Erin, a girl with Downs Syndrome, during grades K-4. Erin's parents were pioneers in the inclusion movement in rural Mecosta-Osceola Intermediate School District (Michigan), and when Erin was 5, they insisted that she be placed in kindergarten in her neighborhood school. Erin experienced a difficult kindergarten year, but during that year, the school district received a grant that supported the development of inclusion teams, including training and follow-up by university consultants. The initial inclusion team for Erin consisted of parents, principal, kindergarten and first-grade teachers, school social worker, psychologist, and teacher consultant. The team used the McGill Action Planning System to develop a common vision of inclusion. Details are provided on team procedures for initiation of new students into the inclusion program, data collection, planning of transition to the next grade, ongoing communication and planning issues, and adaptation of curriculum and evaluation. A table lists expected long-term outcomes for educable mentally impaired students in the categories of academics, social competence, community integration, personal growth and fitness, vocational integration, and domestic living environment. (SV)

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ADAPTIVE INCLUSION WITH SPECIAL NEEDS CHILDREN--

Inclusion That Can Work For Rural Schools

INTRODUCTION

Paradigms are a set of rules that define boundaries and explain what to do to be successful within those boundaries. "When a paradigm shifts, everyone goes back to zero. Just because you were big in the old paradigm, doesn't guarantee a thing in the new." (Burkin, 1993). When the Mecosta-Osceola Intermediate School District (M.O.I.S.D.) contemplated making a paradigm shift from what was known about how and where to educate special needs children, everyone indeed went back to zero. Many caring and concerned professionals, considered competent in their fields, (e.g. general classroom teacher, teacher consultant, resource room teacher, school social worker) were suddenly thrown into a whole new arena with all new expectations, new rules, and new boundaries.

Educationally, if categorical and self contained classrooms are part of the old paradigm, Inclusion can be said to be in the new paradigm. "An inclusive school is an educational institution in which all available resources are collaboratively utilized to meet the educational needs of all children who reside in its attendance area. Inclusive schools have strong site-based management and teacher teams who jointly plan, implement, and evaluate their educational programs. In an inclusive school, all students are placed in age appropriate classrooms. Learning is an interactive process, which relies on a variety of instructional formats to address individual needs and learning styles. Ancillary staff support is provided in the context of the core curriculum and classroom activities." (LeRoy, 1990)

How did the team get through all the change and turmoil? By first answering a very important question in the beginning. That question was, "What is the one thing you believe to be *impossible* today, but if it happened, would significantly impact your business?", (Burkin, 1993). Before undertaking the task of inclusion that question had to be honestly answered. In the past it was thought that educating a child with Down Syndrome required a center based program generally located outside his/her home school. It was thought impossible to educate these children within the general education classroom in their home school., but if we could we thought the lifelong implications would be worth the challenge.

This project would require the 'experts' to set themselves 'back to zero' in terms of their assumed working knowledge base. Moving from the old paradigm of center based programming to the new paradigm of inclusion became a very humbling experience. Wayne Burkin's statement that "'paradigm pioneers' are generally courageous and intuitive individuals" seemed to coincide with the rural ethic found in this community. Who could resist the opportunity to be a pioneer in the Land of Opportunity!

RC 020033

DEVELOPMENTAL HISTORY

Erin was identified as having Down Syndrome shortly after birth. She began receiving Special Education Services at three weeks of age, which included Speech Therapy and Physical Therapy services. At the age of three she began attending the Intermediate School District's center based Pre-Primary Impaired Program, located in rural central Michigan. In 1989, at age five Erin was recommended for placement in the local Developmental Kindergarten classroom. This half-day program was taught by a Special Education Teacher who had an educational aide and a student/ teacher ratio of 13 to 1. The year was a success despite many persistent behavioral difficulties.

Erin began to receive School Social Work services provided by the local district while enrolled in Developmental Kindergarten. At this time affective testing found Erin's social development to be two years delayed for her age. Problematic behaviors included impulsive acts of spitting and hitting, temper tantrums, poor transition, oppositional behavior and peer alienation. She had no friends and had limited social skill development. She often would make poor choices in unstructured situations. She appeared to be extremely agitated by external auditory stimulation. Perhaps due to her impaired vision, her social space was approximately 24-30 inches. Erin would hit and lash out at any peer who violated this invisible 'social space'.

Erin has benefited from having the same School Social Worker during her elementary school years. School social work services have focused on teaching Erin appropriate social skills in the educational setting utilizing the Piaget child development model. Tools utilized by the school social worker have included individual counseling, small group counseling, classroom presentations, staff and teacher inservices and institutional advocacy for inclusive education. Specific strategies utilized with Erin have included role playing, discussions, arts and crafts, social skill games, community maps, flash cards, plays, books, skits, field trips, summer visits, parent and teacher conferences and a great deal of in class problem solving.

An Individualized Education Planning Committee (I.E.P.C.) was held in the Spring of 1990 to plan Erin's Kindergarten placement. Upon parental request Erin was placed in the regular education Kindergarten program at her home school. Erin's parents, both of whom are local professionals, were pioneers in the inclusion movement in this rural Michigan school district. The parents rejected the traditional placement of their daughter in a self-contained center based program and insisted that Erin be placed in an age appropriate classroom in her neighborhood school.

During her Kindergarten year the parents and educators learned many painful and bitter lessons about inclusion for special needs children. The new paradigm was not going to be easy to implement. Erin was placed in a Kindergarten with 25 children and one teacher. By the end of the second week Erin had been involved in over 30 altercations with her teacher and classmates. She was frequently resistant, oppositional, non-communicative, sad, tearful and confused. Inclusion was not working like anyone had envisioned. Problems persisted for over two months before an inclusion team was formed to address the educational needs of Erin and her classmates.

In the Spring of 1991 the Mecosta-Osceola Intermediate School District was awarded an inclusion grant through the Developmental Disabilities Institute operating by Wayne State University. Two consultants from the Developmental Disabilities Institute were assigned to work within the district. Seven inclusion teams were formed from the five local school districts. The Wayne State University consultants were available four days per month the first year of the three year grant; two days per month the second year and once per month the third year. The Inclusion teams

identified local special education students to pilot the inclusion experiment within their local districts.

Inclusion training was provided to the local teams by the inclusion consultants from Wayne State University. An extensive literature review, best practices methods, evaluation and inclusion models were presented to the local districts. Participants were given parameters in which to further develop each individual teams needs accordingly. The local teams found that there was not one right way for all when it came to the details of each individual student.

The initial Big Rapids Inclusion Team for Erin consisted of the parents, building principal, first grade teacher, kindergarten teacher, speech therapist, school social worker, psychologist and teacher consultant. A full time instructional aide would be added to the team at a later date. Before the next team meeting participants were to collect appropriate data needed to plan for first grade placement. The parents, teachers and other support staff were asked to provide a summary of Erin's current level of functioning.

Subsequent team meetings utilized the McGill Action Planning System, which proved invaluable at the time and still does five years later. "The McGill Action Planning System (MAPS) is a positive and affirming process that assists a team of adults and children to creatively dream and plan, producing results that will further the inclusion of individual children with labels into the activities, routines, and environments of their same age peers in their school community." (McGill, 1991). The process involves the whole team sitting in circle fashion answering the following questions: 1. What is the individual's history? 2. What is your dream for the individual? 3. What is your nightmare? 4. Who is the individual? 5. What are the individual's strengths, gifts, and abilities? 6. What are the individual's needs? 7. What would the individual's ideal day at school look like, and what must be done to make it happen? "The MAPS process provides a common vision and road map for all team members, which enables them to be supportive and effective in furthering the integration of learners with disabilities into regular schools." (LeRoy, et.al., 1991) With the MAPS completed the inclusion team began work on matching Erin's I.E.P.C. goals with the first grade curriculum and daily schedule. During this process the team realized that a full time aide would be an essential component for Erin and her classmates to have a successful year. At the recommendation of the district inclusion team and I.E.P.C. a classroom aide was hired.

Deliberate transition efforts were deployed by the teacher and parents to assist Erin into her new classroom. Visits by the classroom teacher to Erin's home and a visit by Erin to her new classroom prior to the start of school resulted in a smooth transition. From this positive experience visits to subsequent schools and classrooms by Erin and her support system have been regularly utilized with success.

The teacher consultant became the coordinator for the inclusion team. The coordinator met with the teacher and the aide once a week during the teachers gym time. The teacher consultant spent approximately one hour per week in the classroom working with the teacher and students. Additional support services included Speech and Language Therapy and Social Work services.

Weekly team meetings were held with the position of facilitator rotated between the members. As the year progressed the frequency of team meetings was reduced to one time per month. The team monitored Erin's educational progress and problem solved behavioral and interpersonal difficulties at these meetings.

In the Spring of 1991, the 'Transition Planning Phase' for second grade was begun. Having already been through the process in first grade, the transition meetings progressed smoothly. Even with all the advanced planning the second year did not go as smoothly as hopped for. Erin's first grade educational aide sadly moved out of the district causing a disruption in the delivery and continuity of services for this child. In addition, the initial team coordinator was transferred to another school within the district. By December of second grade the team was feeling as though they had taken one step forward and two steps back. Avoiding a near open rebellion by the building teachers, parents and Erin the inclusion team demobilized and intensified efforts and service delivery. The year was salvaged and a plan developed for third grade, drawing from the bruised mistakes of second grade.

At mid-year of third grade, the original team coordinator rejoined the team and was given time by the I.S.D. to coordinate and monitor the students educational progress. Bi-monthly team meetings were established for the inclusion team and weekly meetings with the teacher and the aide were held by the teacher consultant. Academic accommodations and curricular adaptations were made throughout the year by the team. The staff had learned that successful inclusion meant continuous adaptations and change by all involved for the new paradigm to work. By years end Erin was participating in a full continuum of educational services. IA marriage of resources between the local district and the I.S.D. was beginning to unfold in a new manner of collaboration and cooperation.

In the Spring of 1994 the decision to transfer Erin to another school in the district for fourth grade was made. The target placement school was in it's third year of a Special Education Inclusion effort that focused on the special education and regular education teachers team teaching. The school had eliminated its special education categorical and resource rooms, although some small group pull-out instruction was still available.

In an effort to provide for a smooth transition, the prospective fourth grade teacher and aide observed Erin within the third grade classroom and met with the current team in an open discussion format. A transition planning meeting was held at the new school site utilizing MAPS, Curriculum planning, daily schedule and behavioral concerns. Successful transition efforts for Erin into fourth grade included home visits by the teacher, school visits by the student and participation in summer school at her new school. All of these activities culminated in Erin's smoothest transition.

The careful planning by the inclusion team was evident in fourth grade as Erin made significant academic and social gains at her new school. Weekly team meetings were soon monthly meetings. The aide is now in the room only 2 hours per day. At a recent team meeting members agreed that their hard work of this inclusion project was a success. Recently a staff member stated that they came to Erin's classroom to talk to her and they couldn't find her. She was indistinguishable from her other classmates. Today Erin does not carry herself like a typical child with Down Syndrome. She lifts her head high when she walks, her speech is articulate, her dress, hairstyle and clothing are no different than her peers. She has learned to ride her two-wheel bike, is a talented artist and was recently invited to join two of her most popular classmates in the local talent show. Erin and her friends will speed rope jump to the latest hit music.

EVALUATION DATA

Monitoring academic, social-emotional and pre-vocational progress of a child with Down Syndrome can be difficult in a center based program let alone a child fully included within the regular education program. The traditional standardized testing instruments were less than acceptable when providing the specific diagnostic information needed to integrate curriculum within the classroom. Academic standardized tests included the Key Math, Woodcock Reading Mastery Test and Clinical Evaluation of Language Fundamentals-R Test. A Criterion Reference style was found to be the most valid and effective assessment tool. The team utilized a combination of the Brigance and the local district classroom goals and objectives which seemed appropriate that year.

The districts core curriculum educational goals for K-12 students had to be modified for Erin. Members agreed that beneficial educational and life skills for Erin would remain to be different than that of her mainstreamed counterparts. Emphasis has been intentionally placed on pre-vocational and life skill adaptations of the essential curriculum. It is not considered educationally imperative that Erin will learn to diagram a sentence as much as it is important to learn to read a menu. These concerns were addressed through the use of Michigan's Special Education Outcomes Guides written for each of the special education disability areas. The Educably Mentally Impaired Outcome Guide was utilized for Erin's program needs. Each set of outcome guides have assessment data which allows appropriate monitoring and adjusting of program needs.

OVERVIEW OF EXPECTED OUTCOMES: EDUCABLE MENTAL IMPAIRMENT

Category 1.0: Academics

- 1.1 Ability to understand and use spoken language to communicate effectively.
- 1.2 Ability to interact with print material to comprehend and convey main ideas, draw conclusions, and make judgments.
- 1.3 Ability to use math processes.

Category 2.0: Social Competence

- 2.1 Ability to interact appropriately within the course of daily social, vocational, and community living.
- 2.2 Ability to develop and maintain friendships and a support network.

Category 3.0: Community Integration

- 3.1 Ability to travel efficiently within the community and beyond.
- 3.2 Ability to access the community to meet personal and daily living needs.
- 3.3 Ability to follow basic safety precautions and procedures to protect self and others.
- 3.4 Ability to act as a responsible citizen.

Category 4.0: Personal Growth and Health and Fitness

- 4.1 Ability to effectively advocate for self.
- 4.2 Competency in personal decision making.
- 4.3 Ability to manage personal health care and fitness.
- 4.4 Ability to maintain appropriate hygiene, grooming, and appearance.
- 4.5 Ability to participate in leisure and recreation activities.

Category 5.0: Vocational Integration

- 5.1 Knowledge of realistic vocational options and a comprehensive plan for career development.
- 5.2 Ability to organize self, complete tasks, and maintain job performance standards.

Category 6: Domestic Living Environment

- 6.1 Knowledge of personal legal rights and responsibilities.
- 6.2 Ability to maintain a personal living environment.
- 6.3 Understanding of the personal responsibilities inherent in family, communal, or other living arrangements.

The Outcomes have proved invaluable for keeping the team on track with most of Erin's needs. The assessment is completed by the parents and the teaching staff. Strengths and weaknesses become quickly apparent and common goals established. For example, in First Grade after completing the assessment data the need for Erin to learn how to use a telephone and acquire the ability to dial 911 became apparent. The First Grade teacher felt this was a worthwhile goal for the entire class and promptly set time aside to integrate it into her curriculum. The guides have also served to remind the Resource Room Teacher of the broader concept base that is being addressed through this inclusion effort and how it differs from the traditional resource room student. The parents were given copies of expectations for an E.M.I. child along with specific goals and objectives that the team would be working towards at school but also ones that could be reinforced within the home.

Teacher comments were also kept from the beginning of the school year to the end. Inevitably the initial comments were always full of doubt and even fear concerning Erin's sometimes difficult behavior. "How will I teach Erin and the other 24 students in my classroom?" "What if she hits another student?" "I don't have any special education training, I won't know what to do." As the teacher discovered, Erin was first a child then a child with a disability. The aide helped fill in the gap of delivery of services within the classroom for all the children. She was there more for the other students than for Erin specifically. Staff also discovered that if Erin hit a child the same rules applied to her as the other children who might hit, (e.g. appropriate consequences). By the end of the school year the teacher comments always changed. "It has been incredible to see the growth Erin has made this year." "At the beginning of the year I had my doubts about Erin functioning in this classroom. I was afraid that she would take away too much time from the other students. What we found is that we all learned just as much from her as she did from us in terms of individual tolerance and need. It was an experience that I wouldn't want to have missed."

THE RECIPE

After visitations to other larger schools with a more varied and wide range of available services, it became evident that in our resource limited rural school district we would have to become very creative. The following is, first, the main structure we followed in each phase of the process as recommended by the Developmental Disabilities consultants and then a rural interpretation of how we made it work. Although each district comes with its own particular challenges, it is hoped that some parts may prove useful to other rural school districts.

INITIATION PHASE

Parent Requests/Program Invitation
IEPC Adjourned at Sending Building
Principal Contacted
Awareness Inservice
School Visitation
Team Identified

We prefer parents to initiate requesting the program as it insures better home to school coordination and effort. Not every child is automatically included within the general education classrooms. The IEPC must agree that it is in the best interest of the child to try inclusion and that there will be a benefit to the inclusive process. We do not allow indiscriminate 'dumping' of special needs children within the classroom. We found it essential to identify a 'Case Coordinator' to the Team. This person was responsible for keeping the team informed and monitoring progress. It is best if the same person stays with the child each year.

DATA COLLECTION PHASE

PARENT INPUT
-Parent Inventory

SENDING SCHOOL INPUT
-Survival Skills Checklist
-Student Skill Summary
-Existing Resources Provided
-Daily Schedule (Current)

HOME SCHOOL INPUT
-Survival Skills Checklist
-Daily Schedule (Anticipated)

This information gives us a picture of the 'whole' child from home to school. Utilization of the Michigan Mentally Impaired Outcomes Guides was used in this process as well as other informal inventories. Sometimes the most difficult part is getting the general education teacher to give us a copy of her/his daily schedule. However, each piece is essential in building a total program for the child and the teachers involved.

TRANSITION PLANNING PHASE

MAPS
Curriculum Matrix
Daily Schedule Developed

Staff Inservices
Peer Preparation
IEP Reconvened & Completed

MAPS is a simple but very powerful tool which we find essential to each Spring planning phase. Once you have used MAPS you will want to use it with every special needs child. All team members get a real sense of the whole child not just what they may see the next year. Whenever anyone is asked to shift paradigms there is fear involved. This phase provides real information not hearsay to the anticipated participants.

IMPLEMENTATION

SHORT TERM
-IEP-at-a-Glance
-Unique Needs
LONG-TERM
-Behavior Plan
-Reference Notebook
-Packet for Special Teachers
-Monitoring Sheets
-Home-School Communication

-Report Card Modifications/Rationales
-Field Trip Plans
-Building Accessibility/ Environmental Modifications
-Inclusive Team Meeting Schedule

Keeping an open line of communication is very important in the success of a project such as this. We found the weekly contact with the classroom teacher by the case coordinator very useful in heading off problems and misinformation that may have resulted in the failure of the project. Anticipating and creating a behavior plan before the year started, answering questions regarding Report Cards and grading and maintaining monitoring sheets all helped tremendously in making it a successful year.

ACCOMMODATIONS

WITHIN CURRICULUM	ALTERNATE CURRICULUM
-Reinforcement	-Parallel
-Adaptation	-Alternative
	-Functional
	-Embedded
	-Partial Participation

We found with Erin that very few accommodations were needed early on in first and even in second grade. However, in third grade we provided specific remedial curriculum which supplemented her general education classroom instruction. Now in fourth grade we have provided more Parallel Curriculum accommodations which allow her to participate within the general education classroom but completing work at her ability level not necessarily a fourth grade level. Some years we have had the good fortune to have wonderful aides who would see the benefit of making material modifications for Erin but then use the same material with other 'needy' children within the classroom. If all else fails the teacher consultant was given time from her schedule to create appropriate learning tools.

CONCLUSION

There were times when even the parents wondered if we had done the right thing for Erin. This year we all just swell with pride regarding the progress Erin has made socially, emotionally and academically. Yes, it has been a very successful year, but only because we maintain the appropriate components throughout the school year. Many of us that have worked on this process admit that we have learned more than we taught. It has broadened our prospective of what is possible within educating children and allowed us a true sharing of responsibility to educate ALL children. We don't have all the answers and share some concerns about the next five years. Anticipated challenges will include integrating a strong vocational curriculum for Erin and managing the diversity that Middle School will challenge us with in two years. Has it been worthwhile? A resounding, YES, would be given from those of us who have participated in this project. Erin's language skills have improved beyond our initial expectations; her social skill development has also exceeded even our greatest hopes and her academic development has improved although not beyond our expectations. The team feels that all the effort has been more than worth it and appropriate. Erin will have a greater chance of successfully being integrated into her community as an adult now than if she had attended school at the segregated center based facility. If we expect the community to accept a diversity of adult people, we need to start early enough for the "ties to bind".